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COMMUNITY SERVICES IMPLEMENTATION PROJECT

**Year 3 Progress Report
(July 1, 2002 to June 30, 2003)**

and

**Proposed Project Plan for Year 4
(July 1, 2003 to June 30, 2004)**

**Prepared by
University of Nebraska Public Policy Center
and
University of Nebraska–Lincoln Center on Children,
Families and the Law**

May 2003

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YEAR 3 PROGRESS REPORT (July 1, 2002 – June 30, 2003)

I. OVERVIEW

In November 2000, the University of Nebraska Public Policy Center (PPC) and the University of Nebraska-Lincoln Center on Children, Families and the Law (CCFL) entered into a partnership with the Lincoln/Lancaster County Joint Budget Committee (JBC) and United Way of Lincoln/Lancaster County (UW). During Year 2, the Lincoln Community Foundation and Woods Charitable Fund, Inc. joined the partnership. The purpose of this University-Community partnership, the Community Services Implementation Project (C-SIP), has been to facilitate implementation of the Lincoln/Lancaster County Human Services Three-Year Comprehensive Plan (Plan). PPC and CCFL have been serving a coordinating and technical assistance role for the overall process including: providing staff support and technical assistance for the Steering Committee, the Advisory Committee, and related subcommittees; providing staff support and technical assistance for the Community Coalitions; assisting Community Coalition Co-Chairs in their facilitation role; developing and maintaining the C-SIP database and website; and, developing the benchmark data infrastructure and data collection process to establish a baseline to compare with future years.

Highlights of the past year's accomplishments include:

- Significant progress made in the benchmarking process.
- Leverage of additional outside funding into the community.
- Continuation funding for C-SIP received from the Lincoln Community Foundation and the Woods Charitable Fund.
- Implementation of a self-evaluation process; and,
- Consensus building process to establish the Human Services Steering Cabinet for Lincoln/Lancaster County.

II. IMPLEMENTATION

Community Coalitions continue to meet on a regular basis, and C-SIP continues to be a transparent process. There are 658 names in the C-SIP database of people who are active members on Coalitions, are interested but not able to attend all meetings, and others in the community who continue to have an interest and want to be kept informed. Minutes of all meetings, updated Coalition action plans and meeting notices are emailed to those with access to email, and for those who do not, they receive information by direct mail (278 people). This information, along with monthly calendars of C-SIP related meetings and various C-SIP reports, is also posted on the C-SIP website (www.csip@nebraska.edu).

Coalitions have spent a great deal of time in “fine tuning” their action plans, primarily so there is a direct correlation between action strategies and benchmarks (see Section VIII Benchmarks, page 20, for details). Definite steps toward implementing action strategies have also been taken by the Coalitions and are summarized below.

Basic and Emergency Needs (submitted by Merry Wills, Co-Chair):

The Basic and Emergency Needs Coalition has approximately 15 core members who are dedicated to the C-SIP process. Members have made significant progress in the following areas:

1. The Coalition made changes to the C-SIP Coalition Definitions and Action Plan to address language assistance and safety. **In addition, action strategies have been identified as either agency driven or an issue that the Coalition can impact. In response to those the Coalition can impact, sub-committees were developed and plans are being designed.**
2. **The Coalition collaborated with the Council of Family, Ethnic and Community Centers on the development of a Uniform Intake/Client Assistance Form that once finalized will be translated into several different languages.** The Basic and Emergency Needs Coalition is supporting providers making the Client Assistance Form available to clients versus having a uniform intake.
3. **Over the last year, Case Management and Information and Referral Services for the provision of basic and emergency needs have been a focus.** Our Action Plan calls for the coordination of such services in addition to culturally and linguistically competent service providers. We proceeded with a survey of agencies in 2002 to gather pertinent data including case management activities, staff available for these services and community training needs in this area. Due to the low response rate, the Coalition revised the survey and is now in the process of re-surveying agencies (distributed April 28, 2003; see page 34). It is the Coalition’s hope that with an increased response rate we will be able to

establish base line data to be used in planning and addressing community needs specific to our Action Plan.

4. Basic and Emergency Needs benchmarking has begun and concrete data is being collected on an on-going basis.

Behavioral Health (input provided by Linda Hellerich, Co-Chair):

The Behavioral Health Coalition established a definition of “behavioral health” early on that reflects a broader reality of relevant behavioral issues – including not only mental health and substance abuse, but developmental disabilities and sexual health as well. Consequently, the Behavioral Health Coalition action plan addresses a broad range of activities, strategies and benchmarks. Working through the benchmark process to address disparities between stated planned activities and benchmarks to ensure measurability has been a time consuming activity due in part to the number of benchmarks and the length/breadth of their plan. The Coalition also recently distributed a survey on May 5, 2003, to specific providers regarding family support services, staff education and training, and diversity (see page 37). The Coalition has been “thinking outside the box” and working collaboratively toward and maintaining positive communication to define strategies and outcomes in terms of issues, rather than “where the money is/goes.” **Ms. Hellerich, Co-Chair, offered the following thoughts on the future: “...securing a mechanism for measuring progress (benchmarks), keeping information updated on a regular basis, and reflecting on the validity of the action plan we have established and the relevance of the plan for the future will be important.”**

A primary outcome of the Behavioral Health Coalition is “greater awareness and acceptance of behavioral health needs in the community.” A challenge that has been expressed is the number of behavioral health services in the community (over 100 has been estimated in Coalition meetings). Another challenge is truly knowing and documenting all the programs and services for behavioral health and determining what “oversight” composition/structure is needed to ensure that awareness of behavioral health issues and their community impact are kept in the public eye.

The existence of the Behavioral Health Plan and the Substance Abuse Action Plan/Teams has resulted in additional funding into the community (see Section III, page11, for details). The Behavioral Health Plan and the C-SIP process were also important pieces of the NEBHANDS Project (Nebraskans Expanding Behavioral Health Access through Networking Delivery Systems), a faith-based and community initiative. Funding for NEBHANDS was awarded to the PPC as the lead agency from the Federal Compassion Capital Fund. Members of the Behavioral Health Coalition have not only been participating in these various other initiatives and projects, but the Coalition has also assumed a monitoring and advisory role, for example with the Mental Health Housing Study currently being conducted by Hanna: Keelan Associates for the State of Nebraska (Lincoln is a target area). Reverend Dr. Norman Leach, Director of the Lincoln Interfaith Council and an active member of the C-SIP Behavioral Health Coalition, will be submitting an application for funding consideration to the NEBHANDS Project. This

application was discussed with the Coalition, and a letter of support from the Coalition will be written

Early Childhood and Youth Development (input provided by Julie Cervantes-Salomons and Bonnie Coffey, Coalition Co-Chairs):

In May 2002, the Youth Development Subgroup of the Early Childhood and Youth Development Coalition received a \$7,000 grant through YouthNet in Kansas City, MO, a regional intermediary for the National Training Institute for Community Youth Work (NTI), and the Kauffman Foundation to become part of the MidWest BEST Initiative (MWB). The Early Childhood and Youth Development Coalition serves as the local lead organization for this initiative. The Public Policy Center/C-SIP serves as the fiscal agent as well as assisting with coordination activities, communication with YouthNet, meeting/training logistics, etc. Demonstrating the collaborative effort and commitment from the community, the MWB agreement was signed by NTI, YouthNet, the Coalition Co-Chairs (Julie Cervantes-Salomons and Bonnie Coffey), Mayor Wesley and the University.

MWB is a regional network of nine communities in the states of Missouri, Kansas, Nebraska, Iowa and Illinois. Lincoln is the only community in Nebraska and stands to be a model for other communities in the State. In the youth development field, youth workers are the adults who work directly with young people in a variety of settings including community-based organizations, faith-based programs and public agencies. To be part of the network, each community ensures the availability of in-service training based on the Advancing Youth Development curriculum and creates ongoing networking opportunities for youth workers. MWB fits perfectly within the action strategies developed by the Youth Development Subgroup of the Coalition to meet an identified need for training for youth development workers in our community to advance this important work as a profession.

Two trainers from YouthNet have come to Lincoln to deliver the training sessions. **To date, two training sessions have been held (October 8-10, 2002 and February 4-6, 2003). Forty-five participants have completed the course, representing 28 different youth serving organizations. Another training is planned for June 2003, and it is already filled (25 maximum).** An overview was also held for interested program administrators on October 11, 2002, following the training, and 15 people attended. Notebooks complete with training modules and resources are covered through the grant. The trainings are based on the “Advancing Youth Development: A Curriculum for Training Youth Workers (AYD),” and participants must commit to three full days of training. Along with registration, participants must get their supervisors’ signatures indicating their support and approval for them to attend. The training is highly interactive and includes reading resources and application tools.

Youth workers trained by the National Training Institute for Community Youth Work (NTI) as facilitators are prepared to deliver training programs that meet the needs of youth workers with varying years of experience and learning styles who come from a wide array of youth-serving settings. Expenses were also covered to send two people

from Lincoln who had completed the local training to Washington, D.C. to participate in specialized training to become future facilitators. LeaAnn Johnson, Co-Coordinator for the Community Learning Centers, and T. J. McDowell, Director of The Lighthouse, both of whom are also active members on the Coalition, are Lincoln's facilitators.

A progress report was submitted to YouthNet by the Coalition January 15, 2003 (see page 24). In addition Deth Im, Manager of Training and Technical Assistance with YouthNet, provided a summary report including comments received thus far from local participants regarding the training and his impression of Lincoln as a MWB community (also attached). It is especially noteworthy to point out the following statements from Mr. Im:

“It is obvious from presentations to youth-serving organizations within Lincoln and training youth workers who have come to the sessions that the Advancing Youth Development Curriculum is not a “stand-alone” venture; rather it builds on existing infrastructure that is committed to young people in Lincoln. One of the great strengths of Lincoln is that infrastructure exists not just for early childhood (ages 0-5) and school age (ages 6-12), but there is a committed and dedicated field working with adolescents (ages 13-18). Therefore, this training can be used to strengthen what already exists within the community. The notion of building upon the community’s existing commitment to youth development allows the facilitators of the curriculum to deepen the conversation during training in ways that are unexplored in other communities... Furthermore, the number of people who commit, come and complete the trainings is an unqualified testament to C-SIP and the Early Childhood and Youth Development Coalition.”

Currently, the Youth Development Subgroup of the Coalition is reviewing their action plan to ensure that the AYD principles are reflected throughout, in addition to completing the benchmark process. “Brown baggers,” organized by LeaAnn Johnson, have been held for trainees to provide ongoing networking opportunities. Post evaluations of trainees will also be conducted, sent to YouthNet for tabulation and a follow-up report at a later date. In addition, the Coalition Co-Chairs and the C-SIP Project Manager have participated in two MWB networking meetings held in Kansas City, MO at the Kauffman Foundation Conference Center.

An “exploratory” meeting was held with Mona Callies, Dean of Continuing Education Division at Southeast Community College, and Nancy Holman, Director of Family & Consumer Science, to discuss the potential of eventually offering the AYD training through the community college, the protocols to be followed, the appropriate program placement, certification vs. Associate Degree, etc. These discussions will continue as interest has been indicated. A grant application for \$16,000 was also submitted by the Youth Development Subgroup, with PPC/C-SIP as the fiscal agent, to the United Way for Capacity Building Funds to continue future MWB/AYD training beyond June.

The Early Childhood Subgroup of the Early Childhood and Youth Development Coalition has been busy updating their action plan and working through benchmarks to

identify contact sources. In going through this process, they have identified certain action strategies as priorities to focus on:

- Raising the awareness of childcare;
- Raising the bar for a sequential training ladder for childcare providers to meet minimum licensing requirements and credentialing;
- Examining barriers and solutions for childcare licensing;
- Working with the local Chamber of Commerce to create an awareness of and promote family-centered practices and principals for businesses to incorporate into the company policies;
- Discussing ways to ensure cultural awareness in early education and to eliminate barriers;
- Establishing a local advocacy group for children's issues; and,
- Coordinating with the Nebraska Chapter of the Association for the Education of Young Children and Voices for Children of Nebraska.

In relation to the above, Lisa Henning, Executive Director of WorkWell, Inc., attended a Coalition meeting to present on WorkWell and discuss how the program could benefit some of the Coalition's planned activities and tie-into their action strategies. In addition, Bonnie Coffey, Co-Chair, and Robin Mahoney, Director of Fund Distribution and Community Planning for United Way, traveled to Omaha to visit with a staff person of the Omaha Chamber of Commerce to discuss "Omaha 2000," a broad community effort which included issues addressing child care staff and wages using a tool to query businesses and providers. Discussions are underway regarding the potential to adapt this tool for Lincoln with assistance from the Omaha Chamber. Plans also include meeting with the new President of the Lincoln Chamber of Commerce regarding early childcare and education, the Coalition's action plan and the adaptation of the Omaha 2000 tool for Lincoln.

The Early Childhood Subgroup is also considering implementing the "Early Childhood Needs & Resources: Community Assessment Tool" from the National League of Cities, Institute for Youth, Education and Families. This tool will dovetail with and enhance data from the Early Childhood benchmarks. To help finance these activities, a letter of inquiry will be submitted to the F. B. Heron Foundation. The Coalition Co-Chair and C-SIP Project Manager also met recently with the Director of the Nebraska Children and Families Foundation regarding potential funding for the Early Childhood activities.

Housing:

The Housing Coalition, like other Coalitions, has been working through their benchmarks. **The Housing Coalition includes participation of key staff from Lincoln Housing Authority and Urban Development with whom they are coordinating efforts to integrate their plans where feasible, for example, with Urban Development's FY 2003 Action Plan: One Year Use of Funds.** Goals of Urban Development's plan – to provide decent housing, to provide a suitable living environment, etc. – dovetail with those in the C-SIP Housing Coalition's plan. Urban Development and Lincoln Housing Authority have also been key data source contacts for the benchmarks.

Other discussions of the Coalition in deciding on their “next steps” have centered on such issues as how services are connected to housing, the potential of cross-training between housing providers and service providers (“Housing 101”), and creating resources that could be used by providers such as a reference notebook on housing resources for case workers to use in referring clients. The Coalition Co-Chairs and the C-SIP Project Manager have also made presentations regarding C-SIP and the Housing Coalition to the Lincoln Realtors Association’s Affordable Housing Task Force, who discussed potentially collaborating on three action strategies in the Housing action plan, and Retro Rockers (a community group affiliated with the Lincoln Public Schools Foundation and the Community Learning Centers). In addition, the Housing Coalition has a monitoring/advisory role for the Mental Health Housing Study and the NEBHANDS Project.

Medical Health (input provided by Steve Beal, Assistant Director of Lincoln/Lancaster County Health Department, and Pat Lopez, Past Co-Chair of the Medical Health Coalition):

The C-SIP Medical Health Coalition made a transition during the last year to minimize duplication of effort and to acknowledge and integrate the Healthy People 2010 health objectives and recommendations with the C-SIP process and outcomes (see page 41 letter sent to all on C-SIP Medical Health Coalition list). The integration of health and human services planning, as well as policy and fund development, is rooted in C-SIP and Healthy People 2010 documents and is communicated to the public through the recommendations and progress in achieving stated outcomes. The focus on this transition continued to be access to health care.

To this end, one of the most significant accomplishments this past year was the Blueprint Project, funded through the Community Health Endowment, which focused on access and related barriers in census tracts 17 and 18. Two important documents came out that process: Access Survey (1200 participants) and the focus group results (34 public input events, 361 participants). A survey was also completed in the Arnold Heights neighborhood (the target area of the C-SIP Medical Health Coalition) following the same design/questions as the Blueprint Project survey. Activities that were planned initially through the Medical Health Coalition in collaboration with the Carol Yoachum Family Resource Center have continued to be implemented through the Health Department. Primary activities have focused on youth and prevention. A health fair is also being planned for the neighborhood with other community organizations involvement.

Transportation (information was submitted by Patte Newman, past Coalition Co-Chair; Kent Morgan, Assistant Planning Director for the City of Lincoln; and Susan Hale, with the Alliance for Sustainable Transportation):

During the past year, the Transportation Coalition also went through a transition, however, planned activities and action strategies were carried through by various means. The Transportation Coalition’s action plan was adopted by the Alliance for Sustainable Transportation (AST), a community group of concerned citizens that included many of

the members of the original Coalition among others. Coalition members and the AST continued to provide verbal and written testimony into the City-County Comprehensive Plan process. **As a result, recommended studies from the Transportation Coalition's action plan were included into the Comprehensive Plan – “The Multi-Modal Transportation Plan” and “The Community-Wide Mobility Review.”** The two studies are being combined into one.

The City of Lincoln will soon begin this community-wide study to identify near- and long-term multi-modal transportation and mobility opportunities. This study will consider alternative approaches to providing personal transportation services and means for encouraging greater use of non-automobile transportation. The study will include consideration of those groups whose transportation needs are not being met today. This effort will result in the preparation of a proposed “Multi-Modal Transportation Plan” for potential incorporation into the City-County Comprehensive Plan and Long Range Transportation Plan. The study is anticipated to take approximately a year to complete. The process will utilize various participation activities to ensure broad public involvement, including a steering committee composed of community representatives from throughout the Lincoln metropolitan area. The City Planning Department is currently reviewing proposals submitted by consultants, and the intent is to start the study July 1, 2003. The C-SIP Project Manager and Kent Morgan, Assistant Planning Director for the City, keep each other informed of these developments.

An interim budget request was also submitted to the Woods Charitable Fund on behalf of the C-SIP Transportation Coalition. The purpose was to provide a series of three facilitated discussion sessions for Lincoln human service agencies that had expressed through a previous survey a willingness to cooperate in implementing a coordinated pilot transportation program. A grant of \$7,500 was subsequently awarded. The objectives of the facilitated discussions were to accomplish the following: foster the identification of issues regarding coordination of transportation; exchange information and reach clarification on the emergence of a shared understanding of the issues and perspectives among participants; and, to develop appropriate strategies resulting in a collaborative plan to implement sustainable outcomes.

Three sessions were held (October 18, November 22 and December 13, 2002). Betsy Kosier, with Interaction Alliance (formerly Director of The Mediation Center), facilitated the October and December sessions, and Margaret Ness, Transportation Consultant out of Boulder, CO, facilitated the November session. Written summaries of each session were provided by the facilitators and distributed to all participants (these summaries are available upon request to anyone interested). **A key outcome resulting from the facilitated process was the development by participants of an agreed upon purpose: “To develop plans leading to the implementation of a limited coordinated system as a pilot, with a focus on special transportation needs...by making commitments, setting priorities, establishing timelines and ensuring follow-through.”** As a result of this purpose, a “Transportation Coordination Work Group” was formed to take the lead in moving forward and incorporating what was learned through these sessions into next steps. Members of this group are: Wende

Baker, Community Health Partners Foundation; DeAnn Hughes, Public Policy Center/C-SIP; Mike Schafer, League of Human Dignity; and Larry Worth and Brian Praeuner with Star Tran. The Work Group was sanctioned by participants of the December session to “make the most, with their discretion, of reasonable opportunities for input and information exchange” and to develop a concept paper and/or proposal to establish a coordinated system that considers project ideas discussed during the sessions including: packaging of pertinent information relative to research; demonstrating system impact; encouraging other agencies who did not participate in the sessions to be involved; and, transforming volunteer effort into a recognized and supportive initiative.

Following the facilitated discussions, the Work Group met several times. Larry Worth, Director of Star Tran, took the lead on developing a concept paper that could be discussed with potential funders for the pilot program. (Copies of the concept paper are available upon request). The budget for this project will be truly collaborative. If funded, Star Tran has received permission to provide office space, supervision and technical assistance for a Project Coordinator. The Board of The League of Human Dignity has committed \$5,000 cash. The Work Group also met with Pam Baker, Woods Charitable Fund, and Deb Shoemaker, Lincoln Community Foundation, and grant applications will be submitted for consideration to both funders for their June funding cycle. Other funding sources are being researched by Work Group members on an ongoing basis. If funded, it is anticipated that the coordinated transportation program would become self-sustaining after three years.

III. ADDITIONAL FUNDING GENERATED

The Lincoln human services community is in an excellent position to respond to funding announcements from the State and Federal government as well private foundations due directly or indirectly to the C-SIP process. The collaborative nature of the C-SIP Community Coalitions and their resulting action plans allows the community to respond to RFPs where previously Lincoln did not meet even the basic application guidelines. So, even if not awarded funding, by being able to apply we have our “foot in the door.” Benefits other than direct funding have also been generated as a result of grants received. For example through the MidWest BEST initiative with the C-SIP Early Childhood and Youth Development Coalition, evidence-based training materials, donated time of two trainers for a total of nine training days, as well as an expense paid “train the trainers” component are part of the grant received from the Kauffman Foundation. The Lincoln community will benefit from this for years to come. As the community responds and receives more funding from federal and private sources, Lincoln/Lancaster County will become further recognized as a model for other communities.

Total funding received to date include the following:

- **Robert Wood Johnson Foundation** - \$60,000 for Demand Treatment; result of the Substance Abuse Action Plan/Teams (SAAT; part of the C-SIP Behavioral Health Coalition Action Plan).

- **Lincoln Community Foundation** - \$11, 500; for SAAT to lay the groundwork to develop and implement a substance abuse prevention campaign.
- **Federal Substance Abuse Mental Health Services Administration (SAMHSA)** - \$100,000 with the potential for up to \$450,000 over period of five years for SAAT.
- **Lancaster County Mental Health Jail Diversion Project – SAMHSA;** \$297,229 for Year 1; \$297,229 for Year 2; and \$291,289 for Year 3. The goal of the mental health diversion program in Lancaster County, Nebraska is to facilitate treatment engagement for adults with a serious mental illness or co-occurring substance abuse disorder, who are in jail for non-violent, misdemeanor crimes or who have had multiple law enforcement contacts in the community.
- **Kauffman Foundation/MidWest BEST Initiative** - \$7,000; Early Childhood and Youth Development Coalition; for training of youth development workers.
- **Woods Charitable Fund** - \$7,500; Transportation Coalition; to hold a series of facilitated discussions to develop a pilot coordinated transportation program.
- **Federal Compassion Capital Fund** - \$3.7 million awarded to the University of Nebraska, Public Policy Center (PPC) for a statewide Behavioral Health Integration Project. The C-SIP process will be a planning model offered to other communities. Action plans developed by the C-SIP Behavioral Health and Housing Coalitions and the C-SIP process were key components of the successful application. Currently the project is working with several agencies and organizations involved in C-SIP and funds from the project will be awarded to several C-SIP involved agencies (e.g. Interfaith Council of Lincoln, Lincoln Action Program).
- The **Family Violence Coalition** reported that they have received approximately \$875,000 in new funding for 10 out of 13 proposed related initiatives. However, more than half of the money will go to statewide efforts through a grant the Nebraska Domestic Violence Sexual Assault Coalition received.

IV. PENDING APPLICATIONS

The following list summarizes other known grant applications involving C-SIP that are currently either pending or in process of development/discussion to be submitted in the near future, as well as those that were submitted and not awarded funding:

- The PPC and the Center on Children, Families and the Law (CCFL) were asked by the Continuum of Care Committee (CoC)/Lincoln Urban Development to submit a grant as part of the federal Housing and Urban Development Supportive Housing Program, due to the work with C-SIP coalitions on the benchmark/data process, particularly with the Basic and Emergency Needs Coalition which addresses homelessness in their action plan. The purpose was to provide technical assistance in the development of their homeless management information system (HMIS), a HUD mandate for CoCs. Although not awarded 2003 funding due to limitation of sufficient funds, it will be resubmitted as part of the 2004 HUD grant application (due July 15, 2003; \$160,000).
- The C-SIP Project Manager and the Research Manager with CCFL/C-SIP continue to assist the CoC in seeking additional funding to support the HMIS. Consequently, a grant application was also submitted for HMIS start up costs to the United Way for consideration of funding under the Capacity Building or Outcomes category; pending (\$44,884).
- A letter of inquiry was submitted for C-SIP to the Kellogg Foundation for the Lincoln community to participate in the *“Pathways to Collaboration: A Knowledge Building Workgroup,”* pending (\$50,000).
- United Way Capacity Building grant application submitted for additional support to the MidWest BEST Initiative training for youth development workers; pending (\$16,093).
- Early Childhood Subgroup of the Early Childhood and Youth Development Coalition will be submitting a letter of inquiry to the F. B. Heron Foundation (potential \$50,000) to support some of their activities; have initiated discussion with the Nebraska Children and Families Foundation; priorities to be determined at the May 15, 2003 meeting of the Early Childhood Subgroup.
- The Transportation Coordination Work Group will be submitting applications to the Lincoln Community Foundation and the Woods Charitable Fund. Due June 1, 2003 (see Transportation Coalition section above for details; total 3 year program costs to become self-sustaining \$275,000).
- A letter of inquiry was submitted to the Nonprofit Sector Research Fund by PPC/C-SIP to develop tools that would assist Lincoln and comparable communities to get a full accounting of and spending related to the total amount of funding from all sources being spent on human services (\$37,975); not advanced for further consideration.

- A grant application was submitted by PPC to the State of Nebraska Health and Human Services for the Mental Health Housing Study/Plan using C-SIP as a model for other communities (\$494,697); not funded.

V. COMMUNITY LINKAGES

C-SIP Coalitions and staff continue to do whatever possible to assure that this initiative coordinates with other related activities in the community by building on current successes, maximizing our efforts to avoid duplication and promoting collaboration where feasible. Examples of some of the major community initiatives that we have ongoing connections with include:

- Human Services Federation; the C-SIP Project Manager has also been participating as a member of the HSF's Education Committee;
- Urban Development/Continuum of Care Committee; the C-SIP Project Manager and Research Manager (CCFL) have been particularly involved this past year with the HMIS Data Subcommittee (see below details);
- Community Learning Centers (see below for details);
- Community Health Partners Foundation; the C-SIP Project Manager has been an active participant in the Healthy People 2010 Community Health Partners Foundation Action Step Development Process, i.e. community forums and Area Resource Teams;
- City of Lincoln Planning Department, and,
- Other various committees and task forces (New Americans Task Force, Alliance for Sustainable Transportation, etc.).

C-SIP's collaboration with the Continuum of Care Committee and the development of their HMIS (Homeless Management Information System) and subsequent funding applications was generated from the converging needs of several efforts currently underway in the community and the State of Nebraska to establish a human services management information system:

- The Lincoln community is in need of an information system that will provide community planners, funders and service providers with accurate, timely and manageable information regarding needs of Lincoln's homeless population.
- C-SIP is currently gathering information across the spectrum of human services in the community to establish baseline measures for ongoing assessment of the progress made in implementing the Lincoln/Lancaster County Human Services Plan.
- The Continuum of Care Committee (CoC) will be at risk of losing Federal Housing and Urban Development (HUD) Supportive Housing Funds and possibly other HUD funding if a HMIS is not in process by the fall of 2004. The CoC is required by federal mandate to have a HMIS in place to track information on clients accessing homeless services in the community and to produce aggregate level data on the homeless population.

- Community Action of Nebraska, as well as other CoCs and other statewide and regional organizations (Panhandle Partnership for Health and Human Services) are also investing into management information systems.

Currently C-SIP benchmark data is gathered on an agency-by-agency basis or from other external sources. This method is very time intensive and an inefficient manner of gathering this data, and because of the multiple sources involved necessarily introduces some significant amount of error into the data due to differences in collection and reporting procedures between agencies and other sources. If funding is awarded from HUD and/or other sources, the results will include:

- The ability of homeless service providers to better plan services for consumers and thereby greatly strengthen the community's planning process by producing current unduplicated count of services provided and clients accessing those services, replacing the current semi-annual CoC point in time count.
- The beginning of the system-wide implementation of a county-wide management information system that will allow the community to produce system wide data on clients, services and outcomes for use by individual agencies, funders, government policy makers and C-SIP for outcome measurement.

Another example of C-SIP working closely with other initiatives in Lincoln is with the Community Learning Centers (CLCs) and the Lincoln Public Schools Foundation. The CLC Co-Coordinator and a number of the site supervisors have been active, supportive members of the C-SIP Community Coalitions, particularly the Early Childhood and Youth Development Coalition. As mentioned above, some members of the CLC staff have also participated in the MidWest BEST training. CLC and C-SIP worked together this past year to discuss ways that the two could better complement the other and begin to explore ways to work more closely at a community planning level.

Ernest discussions began with a CLC site visit in October 2002 from Karen Pittman, Executive Director of The Forum for Youth Investment, and Richard Tagle, with the Public Education Network, which included a meeting with key people involved with the CLC and C-SIP. After reviewing CLC and C-SIP documents (Coalition action plans, definitions, etc.), a paper was written by Ms. Pittman entitled *"Community Services and Community Learning: Connecting the Goals, Aligning the Work, Observations and Recommendations for the Lincoln, Nebraska Community Learning Centers Initiative"* (copies are available upon request). The purpose was to help Lincoln create a strategy for aligning parallel planning processes that have been going on in Lincoln around youth development and out-of-school time. A statement made in the document offered, "...that C-SIP and CLCs are complementary approaches to overlapping challenges."

Recommendations made from Ms. Pittman's observations included: (1) C-SIP and CLCs work together "to maximize the overlap between C-SIP Coalition outcome goals

and the CLC delivery strategies,” and (2) that “C-SIP and CLCs work together to create a public story of the integrated vision of CLCs as a timely response to Lincoln’s and Nebraska’s growing needs.” C-SIP/PPC assisted the Lincoln Public Schools Foundation and CLC staff in development of their Public Education Network Schools and Community Services Initiative Plan. In addition, the C-SIP Project Manager participated in the Public Education Network’s Schools and Community Initiative meeting and site visit held April 2-4, 2003, in Lincoln. It is anticipated that the Lincoln Public Schools Foundation will also be represented on the new Human Services Steering Cabinet.

Community Funding Allocation Processes:

Local funders are interested in assuring that their investments are consistent with the need areas, benchmarks and outcomes addressed in the C-SIP Community Coalition Action Plans. The United Way and the Joint Budget Committee fund distribution process has continued to incorporate the definitions and action plans developed by the C-SIP Coalitions. The C-SIP Project Manager provided an overview on C-SIP for the United Way/JBC training for agency providers and new United Way volunteers. Including C-SIP information as part of the application process was started in 2002 and further enhanced for the 2003-2004 cycle by requiring applicants to address the following:

- Looking at the outcomes determined by the Community Services Implementation Project, which community outcomes is this program addressing?
- Describe your involvement with the C-SIP Coalitions (i.e. who attends coalition meetings?).
- Identify the specific C-SIP benchmark(s) from the C-SIP action plan that the program has affected or will affect.
- Tell us how this program will impact or has impacted the identified C-SIP benchmark(s).
- Does your agency track or collect data on the identified C-SIP benchmark? If yes, what data are you collecting? If no, how will your agency collect information on the progress and impact of the program?
- What effort will be made to implement/improve effort to track outcomes?

The City of Lincoln Urban Development Department’s Request for Proposals also required applicants to address C-SIP related information in their applications for the 2003-2004 Nebraska Homeless Assistance Program (NHAP). For example, agencies demonstrating “support, participation, and involvement in the Community Services Implementation Project” were to receive “high priority” during the review process. A key factor listed in the RFP’s evaluation criteria stressed the following: “Continuum of Care/C-SIP Involvement; evidence throughout the application of coordination of services or providers implementing a continuum of care approach, and participation in the implementation of C-SIP.” **Procedures and policies such as those**

incorporated by the United Way, Joint Budget Committee and Urban Development further strengthens C-SIP by legitimizing the work accomplished by the Community Coalitions (priority area definitions, action plans, benchmarks, etc.).

VI. INFRASTRUCTURE

There continues to be considerable in-kind contributions made to C-SIP from Community Coalition Co-Chairs and Coalition members, the Advisory Committee, the Steering Committee and various other sub-committees and task forces formed as necessary. University faculty, students and others on PPC staff have also contributed time to C-SIP. The following summary of the estimated number of hours dedicated to the project this past year illustrates the significant time commitment that has been invested in the C-SIP process (written January 15, 2003, in response to a request for information from the Lincoln Community Foundation; number of hours dedicated to C-SIP has increased since this response):

The number of volunteer hours dedicated to the C-SIP process by community members, agency representatives, elected officials and University personnel (not paid by project funds) total in the thousands. Human services agencies' contribution to C-SIP is invaluable with staff and particularly with agency executive directors dedicating countless hours to the process by serving as Coalition Co-Chairs, members of the Advisory Committee and as Coalition members. In addition members of the City Council, Lancaster County Board of Commissioners, United Way and local foundation administrators are all committed and deeply involved. Community Coalitions meet generally on a monthly basis, and meetings average 1½ -2 hours in length. There have been approximately 60 total coalition meetings held this past year (est.=120 hours). Average attendance is 10 people, although this may vary. **A total of 1200 hours is estimated to have been dedicated to Coalitions in the past year.**

Co-Chairs of the Coalitions (majority of whom are agency administrators) are also members of the Advisory Committee in addition to other 5 community members. The Advisory Committee held 9 meetings (1.5 hours each; 13.5 hours), plus one joint meeting was held with the Steering Committee (4 hours). Average attendance at the Advisory Committee meetings is 12-15 people. **A total of 263 estimated hours has been dedicated to Advisory Committee meetings.**

The Steering Committee held 8 meetings, plus the joint meeting with the Advisory Committee, for an estimated total of 20 hours for the year. Average attendance at the meetings has been 8 people dedicating an **estimated 160 total hours to the Steering Committee.**

Charting Our Future II was also held on February 22, 2002, and there were 120 participants representing 74 different agencies, plus members of the community. **Those attending Charting Our Future dedicated a total of 600 hours.** In addition youth development agencies in the community sent 25 members of their staff to participate in the 3-day (8 hours each) MidWest BEST (MWB) initiative training, totaling **480 hours for MWB.**

Overall a conservative estimate of the number of volunteer hours dedicated to C-SIP is over 2,680. This total does not include other meetings held with various related C-SIP sub-committees (Data, Conference Planning, Funding, etc.), the Substance Abuse Action Teams (approx. 55 people), individual planning meetings held with Coalition Co-Chairs, and University personnel.

A significant development in terms of infrastructure and sustainability came to fruition after a long consensus building process between the Advisory and Steering Committees leading to the formation of what is currently being referred to as the Human Services Steering Cabinet. The Cabinet held its first meeting on May 16, 2003. The Steering Committee began a long range visioning and planning process in Summer 2002 to firmly establish the infrastructure to sustain human services planning in Lincoln/Lancaster County. During this past year, Kent Seacrest, a local attorney who has worked with numerous community boards and organizations on a broad range of issues, was asked to facilitate this process. At Mr. Seacrest's recommendation, three separate meetings were held with the Steering Committee (September 6th, September 27th and October 6, 2002). Two separate meetings were held with the Advisory Committee on October 3rd and October 17, 2002. A joint Steering and Advisory Committee meeting was held to reach consensus on December 18, 2002. The long anticipated joint meeting was well attended with good representation from both the Steering and Advisory Committees (21 members) and C-SIP staff present. To put the final touches on the recommendations from the joint meeting, a "Detail Subcommittee" was then formed to confirm the next steps regarding mission, membership, structure, etc. of the Human Services Steering Cabinet. The Subcommittee met March 11, 2003.

There will no longer be separate Steering and Advisory Committees with the formation of the Human Services Steering Cabinet. New plans also include a "Standing Committee" of the Community Coalition Co-Chairs to meet on an as needed basis. Membership of the Cabinet will include the following: one representative from the Mayor's office, two County Commissioners, two from the City Council, two from the United Way, one from the Lincoln Community Foundation, one from the Woods Charitable Fund, and one Community Coalition Co-Chair from each priority area. Invitations will also be extended to the following: the President of the Human Services Federation, Community Health Endowment, Cooper Foundation, Lincoln Public Schools Foundation, Nebraska Children and Families Foundation, Region V Systems, and the State Health and Human Services System. The Cabinet will be led by Tri-Chairs, the first being one from the City, one from the County and one from the United Way. Ray Stevens, County Commissioner, and Steve Caswell, Chair of the United Way Fund Distribution Committee, will be co-chairing the first meeting.

The mission of the new Human Services Steering Cabinet will be:

"The Human Services Steering Cabinet will guide and ensure a sustainable and dynamic planning, documentation and evaluation process for human services in Lincoln/Lancaster County."

The roles of the Human Services Steering Cabinet include:

- Monitoring to keep abreast of changes and advocate movement in the right direction for the purpose of implementing planning, but not programming.
- Acting as a coordinator and a catalyst for change and implementation, taking a proactive approach whenever possible and reactive approach when necessary, but not providing or funding direct services.
- Updating/assessing the needs of the community on a regular basis and evaluating those needs to help set priority areas to be addressed.
- Preparing and updating the Lincoln/Lancaster County Human Service Plan, but not operating in a vacuum. The Cabinet will be cognizant of other community initiatives to avoid duplication of effort. The plan will be revisited every 3-5 years (exact timeframe to be determined by the Cabinet).
- Checking on progress every six months and compiling an annual report on the progress of the benchmarks. There will also be periodic reports/updates available from the Community Coalitions.

Other issues needing to be addressed by the Cabinet include: (1) sustainability and budget for the overall C-SIP process and activities of the Coalitions; (2) marketing – determining the extent and type of; timeframe for next needs assessment and plan update; education vs. advocacy – establishing rules and procedures (particularly for Coalitions); (3) strategizing on getting new members to the table; (4) general operating guidelines; and (5) perhaps most importantly – how to break down the silos created by priority areas and foster cross-coalition work.

Staffing for Year 3 included hiring a new fulltime C-SIP Project Assistant (Toni Howard hired in July 2002; position previously held by Jill Olney). Responsibilities of this position include making arrangements for and attending meetings of all C-SIP Coalitions, Advisory, Steering and other related committees/task forces; taking minutes of all meetings and processing them in a timely manner; and, maintaining the C-SIP data base and website. In addition, this past year, the Project Assistant has also provided assistance to the Early Childhood and Youth Development Coalition with logistics for the MidWest BEST Advancing Youth Development training sessions (see page 33). A transition occurred when the Research Specialist/Coalition Coordinator position (LaChelle Bailie) was vacated in September of 2002. This position was not refilled.

Core staff remained the same for 2002-2003:

- Project Manager (1.0 FTE), DeAnn Hughes;
- Research Manager (.15 FTE), Jeff Chambers with the Center on Children, Families and the Law;
- Graduate Research Assistant to assist with the data benchmarking process (.25 FTE); and,

Significant in-kind contribution from the Director of the PPC, Alan Tomkins (.10 FTE).

VII. SELF EVALUATION

In 2002, the PPC conducted community comparison research seeking out how comparable cities to Lincoln have conducted human services planning, or what was referred to in the literature as “community collaborative initiatives” (see C-SIP Annual Report for 2002 for a copy of the research report or visit the website www.csip.nebraska.edu). It was recommended as a result of the report that C-SIP conduct a self-evaluation of the implementation process. This self-evaluation was conducted in August 2002.

The instrument used for the self-evaluation process was adapted (with permission) from the Collaboration Factors Inventory developed Amherst H. Wilder Foundation (see page 43). Four additional questions were added that were more specific to the respondents and their relationship to C-SIP. The survey instrument was distributed to all in the C-SIP database via email, posted to the C-SIP website and hard copies were mailed to those without access electronically. The majority of those responding (70%) were agency/organization administrative staff. The rating of their involvement in C-SIP activities averaged 4.3. Responses addressing the unique purpose of the C-SIP collaboration averaged 4.2. According to the Wilder Foundation, scores of 4.0 or higher indicate strength. Agency involvement and support for C-SIP is further demonstrated by additional comments provided, such as the following:

- *“Kudos to everyone working on this. It is difficult but important work.”*
- *“Doing a stellar job with the Behavioral Health Coalition! Public Policy Center staff are first rate.”*

The Collaboration Factors Inventory will be repeated again in July/August 2003.

VIII. BENCHMARKS

During this year the majority of baseline benchmarks for C-SIP Coalitions have been collected. This establishes the Spring 2002 through Spring 2003 time period as the annual baseline from which further benchmark measurements will be compared.

Coalitions with C-SIP staff began the year with final revision of their identified benchmarks. Following this, Coalitions worked through their benchmarks identifying data sources for each and specific contact persons. Data collection proceeded as Coalitions completed their data source identification. Collection of all benchmark data was made by contact from C-SIP staff to identified data sources or by Coalition members and transfer of data to C-SIP.

Within most Coalitions, one or more benchmarks were identified for which there is no known collection source. For many of these benchmarks, the data existed at the

agency level but was not collected across the agencies. The majority of these benchmarks were in the Basic and Emergency Needs, Behavioral Health, and Youth Development Coalitions. Coalition surveys were developed with input from the Coalitions on questionnaire structure and proper wording to collect the required data. Currently the Basic and Emergency Needs and Behavioral Health surveys are in the field and being returned to C-SIP. The Youth Development survey will be fielded very shortly.

A complete benchmark report will follow this report, scheduled to be completed by the end of June 2003.

PROPOSED PLANS FOR NEXT YEAR
July 1, 2003 - June 30, 2004

Plans for the next year will focus on the following activities:

1. Continue to provide staff support and coordination for the C-SIP Community Coalitions and their activities.
2. Provide staff support for the newly formed Human Services Steering Cabinet, i.e. updating/assessing community needs, preparing and updating Lincoln/Lancaster County Human Services Plan, etc. (see page 18).
3. Continue to assure that C-SIP is linked with other related community-wide initiatives. It is recognized that one plan can't be "all things to all people." However, to maximize both financial and human resources, we can make better use of each other's findings (e.g. survey results), approach the community and consumers in a more coordinated fashion, take a more integrated approach, and thus better meet the needs of all concerned.
4. Continue to research and apply to various funding sources to support the overall C-SIP process and Community Coalition planned activities.
5. Hold the annual Charting Our Future conference, potentially in September 2003. The decision was made in a smaller long-range planning group meeting to hold the conference at a later date than usual (previously held in March 2001 and February 2002) in order to get the Human Services Cabinet more fully established.
6. Conduct a follow-up self-evaluation using the Amherst H. Wilder Foundation Collaboration Factors Inventory.

Benchmarking Planned Activities for 2003 – 2004:

1. Create a public access point/s for presentation of C-SIP benchmarking data. Current planning focuses on the use of the C-SIP website as a primary access point.
2. Beginning in the fall of 2003, data collection for year-two benchmarks will commence.
3. Staff will continue working with the Coalitions as plans are refined and modified to update the benchmarks to be collected.
4. Upon completion of year-two data collection, some preliminary analyses of patterns in benchmark data over time can be made.

— Attachments —

1. MidWest Best Progress Report: January 15, 2003
2. MidWest Best Progress Report: “About Lincoln, NE” submitted by Deth Im, Manager of Training and Technical Assistance with YouthNet Kansas City
3. MidWest Best Fact Sheet
4. Basic and Emergency Needs Coalition Survey
5. Behavioral Health Coalition Survey
6. Medical Health Coalition Letter
7. Wilder Collaboration Factors Inventory
8. Budget for 2003-04

MidWest Best Progress Report: January 15, 2003

MidWest BEST Progress Report
Community Services Implementation Project (C-SIP)
Early Childhood and Youth Development Coalition
Lincoln, NE
January 15, 2003

Core Activities:

A. Implement the MidWest BEST Initiative:

The community of Lincoln, Nebraska was ready and eager to be a part of the MidWest BEST Initiative. The C-SIP Early Childhood and Youth Development Coalition represents a diverse group of youth serving organizations, and they have worked hard over the last year and a half to develop and implement a plan to assist our community in achieving positive outcomes on behalf of our youth. MWB specifically relates to the following Statement of Outcome in the Youth Development plan: ***“Youth development programs will be accessible to all youth, provided by trained staff and volunteers.”***

The “lead organization” for MWB in Lincoln is the Early Childhood and Youth Development Coalition with assistance from the University of Nebraska Public Policy Center (PPC), the lead administrative organization for the overall C-SIP process in the community. The first of three training sessions was held October 8-10, 2002. Twenty-five youth development workers participated (many of whom are members of the Coalition). Participant evaluations from the first training were all quite positive, and participants continue to state how worthwhile the experience was. We also held a two-hour overview meeting on October 11, 2002 for key interested administrators of youth serving organizations, potential funders, and community leaders. Deth Im led this meeting as well. Sixteen people participated, and it generated a great deal of interest for

the next training. Two additional trainings are scheduled for February 4-6 and June 17-19, 2003.

B. Coordinate the Advancing Youth Development Training Program:

This is very much a shared responsibility between the Coalition and the PPC. The C-SIP Project Assistant (Toni Howard) handles all logistical arrangements (training rooms, meals, mailings, etc.). The overall day-to-day coordinative responsibilities are shared by the Coalition Co-Chairs (Julie Cervantes-Salomons and Bonnie Coffey) and the C-SIP Project Manager (DeAnn Hughes). The Co-Chairs, Project Assistant and Manager alternate providing on-site support during the training sessions, and the Coalition serves in an advisory capacity and assists with participant recruitment and selection. Training dates and registration material are also available on the C-SIP website (www.csip.unl.edu) and notices/articles have appeared in the Lincoln Human Services Federation's newsletter and their website calendar and in the "Neighborhood Extra" section of the Lincoln Journal Star newspaper.

C. Facilitate Networking and other Professional Development Opportunities:

A "brown bag" luncheon will be held January 31, 2002 for the participants of the October training. This will be hosted and facilitated by LeaAnn Johnson, Coordinator for Lincoln Community Learning Centers and our local AYD facilitator. *"Coordinate training events for staff, youth and volunteer"* is also an action strategy in the Coalition's action plan, so more of this type of activity will occur in the future either through MWB and/or the Coalition.

D. Sustain the Initiative:

A Sustainability Subcommittee of the Coalition has been formed to address sustaining the training in Lincoln by identifying public/private funders and partnerships and strategizing on how to approach them. A preliminary budget has been developed. Plans include applying to all local funding sources, including United Way, the Joint Budget Committee (JBC) for Lincoln/Lancaster County, the Cooper Foundation, Woods Charitable Fund and the Lincoln Community Foundation, as well as Keno funds. The JBC and United Way joint application cycle has just opened, and it includes a “capacity building fund.” Plans also include holding discussions with the Dean of Continuing Studies at Southeast Community College in Lincoln.

E. Establish a Community Advisory Group:

The Coalition has just begun discussions on establishing an advisory group and brainstorming on potential members. Prior to this point, concerns had been expressed regarding duplication of effort with the Coalition’s role, the number of meetings all are involved in, etc. However, the need to include funders, the business community and others has been recognized. What is being considered is devoting a yet to be determined number of Coalition meetings to MWB-related discussions, strategizing on sustainability, etc. “Special MWB Advisors” will be included in these meetings. A subcommittee has been formed to work on the details.

F. Conduct On-going Evaluation:

Evaluations, supplied by YouthNet, were completed at the end of the October training session by all participants, as will be done with the next sessions. If more is to be done or additional information needed, we will be happy to comply.

G. Ensure Training Participation Represents Entire Community of Youth-Serving Organizations:

The Coalition represents a broad sector of the community and has assisted in outreaching to other organizations. The first training included staff from Lincoln Parks & Recreation, Lincoln Public Schools, County Probation and the Youth Pastor with the Salvation Army. The overview meeting held in October also provided an opportunity to outreach to other agencies/organizations. However, the Coalition recognizes the need to do more “to get the word out.” A list of organizations that have not yet participated or inquired about the training was generated during a recent Coalition meeting, and Coalition members will make individual contacts.

H. Lessons Learned, Strengths and Challenges:

Initially we planned to hold our first training in July of 2002. We soon learned that it was “too much, too soon.” We made assumptions that we would be overwhelmed with people wanting to participate, but that was not the case. More work than we originally thought was needed to ensure success. Another challenge is the commitment on the part of youth serving organizations to free up their staff to attend three days of training. This is difficult, particularly for smaller organizations. But, word of mouth from those first participants has helped to assure others that it is worth it. Our primary strength, as stated above, lies with the broad representation and the commitment and dedication by strong people who serve on the Coalition and care deeply about youth in our community. The already established working relationship between the Coalition and the Public Policy Center and the existence of the Coalitions action plan are also very strong contributing factors. Lincoln is a welcoming community and support for MWB will continue to grow.

MidWest Best Progress Report: “About Lincoln, Nebraska”

submitted by Deth Im,
Manager of Training and Technical Assistance with
YouthNet of Kansas City

MidWest BEST Progress Report About Lincoln, NE

Training Logistics

First Training: 10/8/02 - 10/10/03

Participants who completed Course: 22

Second Training: 2/4/03 - 2/6/03

Participants who completed Course: 23

YouthNet Comments

It is obvious from presentations to youth-serving organizations within Lincoln and training youth workers who have come to the sessions that the *Advancing Youth Development* Curriculum is not a “stand-alone” venture; rather it builds on existing infrastructure that is committed to young people in Lincoln. One of the great strengths of Lincoln is that infrastructure exists not just for early childhood (ages 0-5) and school age (ages 6-12), but there is a committed and dedicated field working with adolescents (ages 13-18). Therefore, this training can be used to strengthen what already exists within the community. The notion of building upon the community’s existing commitment to youth development allows the facilitators of the curriculum to deepen the conversation during training in ways that are unexplored in other communities.

Both of the trainings have demonstrated the diversity of youth-serving organizations in Lincoln with 28 organizations represented. Furthermore, the number of people who commit, come and complete the trainings is an unqualified testament to C-SIP and the Early Childhood and Youth Development Coalition. In particular, YouthNet is immensely grateful for the dedication and willingness of DeAnn Hughes, Julie Cervantes-Salomons and Bonnie Coffey to promote MidWest BEST. Moreover, this initiative’s success is due in large part to the on-site coordination of Toni Howard. Certainly, Lincoln shines as a stalwart MidWest BEST community and YouthNet is excited to usher it into the growing network of communities across the country that are impacting youth by creating professional development systems for youth workers.

Participant Comments

1. What did you like most about this training?

- ☺ “I loved the information and feel an excitement about putting it into action in my agency.”
- ☺ “Ways to encourage youth involvement.”
- ☺ “The program development tool will come in handy.”
- ☺ “The interaction with other professionals, thinking about youth work as a valid, important profession.”
- ☺ “Loved meeting colleagues.”
- ☺ “The variety - book learning, group work, activities to keep us moving around.”
- ☺ “I will actually use this training in my work.”
- ☺ “Most, if not all, learning styles were incorporated.”

- ☺ “The practical application of how to move towards developmental outcomes vs. exploring the philosophy of youth growth and psychology.”
 - ☺ “I really enjoyed the way facilitators encouraged group interaction and participation.”
 - ☺ “Energy, networking, ah-has”
 - ☺ “Seeing what our agency has been doing and finding out why we do them.”
2. What did you learn that was most relevant to your work?
- ☺ “I need to let the youth voice out and help with planning instead of thinking I know it all.”
 - ☺ “That you don’t need to make wholesale changes but examine what you’re doing and how it really fits youth/adults within the community.”
 - ☺ “I like the identification of core competencies of youth workers and I think it begins to move the entire field into validation for those outside the field.”
 - ☺ “Based on all of the material, I can determine ways to better programs, opportunities for youth and myself.”
 - ☺ “Having youth be the ‘front line’ of your program.”
 - ☺ “How to think about what’s best for the youth and not myself.”
 - ☺ “All the areas were relevant but learning how to apply them most helpful.”
 - ☺ “The new way of program planning, common language.”
 - ☺ “The model for programming was very useful.”
 - ☺ “The indicators and breakdown of opportunities and supports activities . . .”
 - ☺ “Networking will be invaluable to this city.”
 - ☺ “I believe the 12 outcomes will be really beneficial.”

MidWest Best Fact Sheet



There is an exciting new opportunity available to the youth-serving sector in Lincoln!

Lincoln is a partner in a new regional training initiative called MidWest BEST. This initiative provides professional development opportunities to the adults who work with youth in a variety of settings, including community-based organizations, faith-based programs and public agencies.

What participating youth workers will explore:

- ♣ **An Introduction to the Youth Development Approach**
 - ♣ **Developmental Youth Outcomes: The Bottom Line of Youth Work**
 - ♣ **Cultural Assumptions and Stereotypes About Young People: From Adultism to Caring**
 - ♣ **Strategies of Youth Participation**
 - ♣ **Opportunities and Supports for Youth Development: Identifying Best Program Practices**
 - ♣ **The Core Competencies of Youth Workers**
-

Midwest Best Training

June 16,17, 18, 2003 8:00 a.m. – 5:00 p.m.

University of Nebraska–Lincoln, East Campus Union

The C-SIP Early Childhood and Youth Development Coalition is the lead organization coordinating this initiative for Lincoln. For more information, please contact Julie Cervantes-Salomons (464-2227, e-mail jcsalomons@alltel.com), or Bonnie Coffey (441-8695, e-mail bcoffey@ci.lincoln.ne.us) or DeAnn Hughes, (472-0501, e-mail dhughes6@unl.edu).

YouthNet of Greater Kansas City is the regional intermediary providing the training and other technical assistance to participating youth-serving agencies throughout the Midwest region. For an overview of MidWest BEST visit www.kcyouthnet.org!

Basic and Emergency Needs Coalition Survey

Basic and Emergency Needs Coalition Service Provider Survey Community Services Implementation Plan (C-SIP)

Agency _____

- 1.** How many employees in your agency have the primary job function of case management of clients? (Case management is a partnership between the case manager and the consumer, advocacy to ensure that eligible services/resources are obtainable and modeling of effective interaction with service providers. It facilitates and monitors communication and coordination between multiple service providers, provides continuity of care, and prevents and manages crises.)

_____ Number of case managers _____ Number of vacant positions
_____ Number of case managers hired in the last 12 months

- 2.** What additional functions do case managers within your agency perform for your clients that you think should be added to the above description?

- 2a.** What additional functions does your agency perform for clients other than those performed by case managers?

- 3.** Are any of the case managers at your agency fluent in another language besides English?

_____ Yes _____ No

If Yes, what languages?

- 3a.** How many of case managers at your agency are native to another culture?
_____ number of case managers native to another culture

Please specify the cultures they are native to:

- 4.** Does your agency have a cultural or linguistic sensitivity training program for case managers?

_____ Yes _____ No

If yes, please describe the program briefly: _____

4a. Does your agency provide linguistic training?

_____ Yes _____ No

If yes, specify languages: _____

4b. How many of your employees have attended cultural or linguistic training in the last year?

_____ # of case managers _____ # of other employees _____ # volunteers

5. What is the average monthly caseload that the case managers at your agency carry?
_____ Average monthly caseload

6. Does your agency provide information and referral services?

_____ Yes _____ No

6a. How many employees other than case managers provided information and referral to the public, either walk-in or phone inquiry?

_____ #

6b. Which of the following information and referral tools are utilized by case managers and other employees at your agency? (check all that apply)

_____ Our own database

_____ Alltel "Blue Pages

_____ Community Connections

_____ IRis Database

_____ IRis Data on the InterLinc website

_____ Other web databases

8. How many other employees at your agency not including case managers are involved in providing information and referral to the public either walk-in or phone inquiry?

_____ Number employees

9. Would employees at your agency be interested in participating in a series of training programs on the availability of various programs and services in the community?

_____ Yes _____ No If yes, what topics would be most desired?

Thank you for your participation in this survey.

Please return by email or fax to C-SIP:

E-mail: csip@unl.edu Fax: (402) 472-5679

University of Nebraska Public Policy Center

121 South 13th Street Suite 303

Lincoln NE 68588-0228

Behavioral Health Coalition Survey

Date: _____

Agency Name: _____

Primary Contact: _____

The C-SIP **Behavioral Health Coalition** defines **Behavioral Health Care** as: "Behavioral Health Care provides prevention, intervention, and treatment services in the areas of mental health, substance abuse, developmental disabilities, and sexual health. Behavioral Health Care should be individualized, holistic, strength-based and culturally competent and may include on-going care and support and non-traditional services."

• I. **Family Support**

1. **Of your Behavioral Health programs how many involve support services for family members and significant others?** _____
2. **How many training opportunities has the agency conducted on providing family support to clients?** _____
3. **How many family focused case management services does your agency provide?** _____

• II. **Sexual Health and Substance Abuse**

1. Does your agency provide sexuality education/training or materials to Behavioral Health providers? ____ Yes ____ No
If yes, how many trainings were conducted in the last 12 months? ____
How many individuals attended these trainings? _____
2. Does your agency provide teen pregnancy prevention programs for ____ youth? ____ parents? (Yes or no response)
3. Of the Behavioral Health programs offered to pregnant teens by your agency, how many address birth defects resulting from alcohol use during pregnancy? _____ N/A _____
4. Does your agency provide training of BH staff on physical and sexual abuse? ____ Yes ____ No
If yes, how many trainings did your agency conduct in the last 12 months? ____
How many individuals attended these trainings? _____
5. Did your agency develop alternative programs for chronic users of detox in the past year? ____ Yes ____ No
If yes, please list alternatives: _____
6. Did your agency implement any of the planned activities in the Lancaster County Substance Abuse Action Team (SAAT) Plan during the past 12 months? ____ Yes ____ No
If yes, please list the activities implemented: _____

• III. **Diversity**

1. How many training opportunities on racial and ethnic diversity were available for your staff during the past 12 months? (include internal activities and those that staff were encouraged to attend outside of agency) _____
2. How many of your staff attended racial and ethnic diversity training during the past 12 months? _____
3. What percentage of your direct service staff is composed of racial ethnic minorities? ____ %
List minorities and ethnic group represented: _____

4. What percentage of your indirect service staff is composed of racial or ethnic minorities? ____ %
List minorities and ethnic group represented: _____

5. We are interested in the number of new programs or services with specific components addressing the following areas:
Check and indicate the number of services developed in the last year:
☐ Bi-lingual services # _____ ☐ Ethnic / cultural services # _____

☐ Interpretive services #_____

☐ Sign language services #_____

If you developed bi-lingual and or interpretive services, please specify which languages:

If you developed ethnic or cultural services please, specify which ethnicities or cultures:

Please list the behavioral health programs provided by your agency in the City of Lincoln and Lancaster County

Please list the behavioral health programs provided by your agency in the City of Lincoln and Lancaster County

Agency

Medical Health Coalition Letter



121 South 13th Street
Suite 303
Lincoln, NE 68588-0228
(402) 472-CSIP (2747)
FAX (402) 472-5679
Email: csip@unl.edu
www.csip.unl.edu

October 28, 2002

Dear C-SIP Medical Health Coalition Participants:

We would like to thank those of you who have participated on the C-SIP Medical Health Coalition. As you know, the Coalition discussed the Healthy People 2010 document, and adopted the recommendation to focus on development of neighborhood based health services. To this end, the Coalition targeted its efforts in the Arnold Heights neighborhood, working in tandem with the Carol Yoakum Family Resource Center.

Since this decision was made, other initiatives have been developed to address neighborhood based health services, and other Healthy People 2010 recommendations, the effort that is coordinated by the Lincoln Lancaster County Health Department. We think the Medical Health Coalition is best served if it works in tandem with these initiatives, along with the initiatives that will evolve over time. We also think it is important to coordinate our efforts, not work in duplication, or worse, work in opposite directions.

Therefore, to avoid duplication of effort and to maximize our use of human (and, hopefully, financial) resources, the activities of the C-SIP Medical Coalition will coordinate with Healthy People 2010 by becoming part of the Healthy People 2010 health objectives. This move will minimize duplication in health planning, strengthen what has been started by the Coalition, and allow for successful implementation of the vision recommended by the Medical Health Coalition and more effectively address the benchmarks identified by the Coalition.

If you have any questions or concerns, please contact DeAnn Hughes, C-SIP Project Manager at 472-0501, or Pat Lopez, Coalition Co-Chair at 441-8057.

Sincerely,

DeAnn E. Hughes
C-SIP Project Manager

cc: Wendy Baker, Community Health Partners Foundation
Steve Beal, Lincoln/Lancaster County Health Department
Kit Boesch, Lancaster County
Pat Lopez, Lincoln/Lancaster County Health Department
Robin Mahoney, United Way
Alan Tomkins, Public Policy Center



Wilder Collaboration Factors Inventory

The Wilder Collaboration Factors Inventory

Name of Collaboration Project:

Date:

Respondent Name (optional):

Organization (optional):

Statements about Your Collaborative Group

History of collaboration or cooperation in the community

1. Agencies in our community have a history of working together.

1 2 3 4 5

2. Trying to solve problems through collaboration has been common in this community. It's been done a lot before.

1 2 3 4 5

Collaborative group seen as a legitimate leader in the community

3. Leaders in this community who are not part of our collaborative group seem hopeful about what we can accomplish.

1 2 3 4 5

4. Others (in this community) who are not part of this collaboration would generally agree that the organizations involved in this collaborative project are the Aright@ organizations to make this work.

1 2 3 4 5

Favorable political and social climate

5. The political and social climate seems to be Aright@ for starting a collaborative project like this one.

1 2 3 4 5

6. The time is right for this collaborative project.

1 2 3 4 5

Mutual respect, understanding, and trust

7. People involved in our collaboration always trust one another.

1 2 3 4 5

8. I have a lot of respect for the other people involved in this collaboration.

1 2 3 4 5

Appropriate cross section of members

9. The people involved in our collaboration represent a cross section of those who have a stake in what we are trying to accomplish.

1 2 3 4 5

10. All the organizations that we need to be members of this collaborative group have become members of this group.

1 2 3 4 5

Members see collaboration as in their self-interest

11. My organization will benefit from being involved in this collaboration.
1 2 3 4 5

Ability to compromise

12. People involved in our collaboration are willing to compromise on important aspects of our project.
1 2 3 4 5

Members share a stake in both process and outcome

13. The organizations that belong to our collaborative group invest the right amount of time in our collaborative efforts.
1 2 3 4 5
14. Everyone who is a member of our collaborative group wants this project to succeed.
1 2 3 4 5
15. The level of commitment among the collaboration participants is high.
1 2 3 4 5

Multiple layers of participation

16. When the collaborative group makes major decisions, there is always enough time for members to take information back to their organizations to confer with colleagues about what the decision should be.
1 2 3 4 5
17. Each of the people who participate in decisions in this collaborative group can speak for the entire organization they represent, not just a part.
1 2 3 4 5

Flexibility

18. There is a lot of flexibility when decisions are made; people are open to discussing different options.
1 2 3 4 5
19. People in this collaborative group are open to different approaches to how we can do our work. They are willing to consider different ways of working.
1 2 3 4 5

Development of clear roles and policy guidelines

20. People in this collaborative group have clear sense of their roles and responsibilities.
1 2 3 4 5
21. There is a clear process for making decisions among the partners in this collaboration.
1 2 3 4 5

Adaptability

22. This collaboration is able to adapt to changing conditions, such as fewer funds than expected, changing political climate, or change in leadership.

1 2 3 4 5

23. This group has the ability to survive even if it had to make major changes in its plans or add some new members in order to reach its goals.

1 2 3 4 5

Appropriate pace of development

24. This collaborative group has tried to take on the right amount of work at the right pace.

1 2 3 4 5

25. We are currently able to keep up with the work necessary to coordinate all the people, organizations, and activities related to this collaborative project.

1 2 3 4 5

Open and frequent communication

26. People in this collaboration communicate openly with one another.

1 2 3 4 5

27. I am informed as often as I should be about what goes on in the collaboration.

1 2 3 4 5

28. The people who lead this collaborative group communicate well with the members.

1 2 3 4 5

Established informal relationships and communication links

29. Communication among the people in this collaborative group happens both at formal meetings and in informal ways.

1 2 3 4 5

30. I personally have informal conversations about the project with others who are involved in this collaborative group.

1 2 3 4 5

Concrete, attainable goals and objectives

31. I have a clear understanding of what our collaboration is trying to accomplish.

1 2 3 4 5

32. People in our collaborative group know and understand our goals.

1 2 3 4 5

33. People in our collaborative group have established reasonable goals.

1 2 3 4 5

Shared vision

34. The people in this collaborative group are dedicated to the idea that we can make this project work.

1 2 3 4 5

35. My ideas about what we want to accomplish with this collaboration seem to be the same as the ideas of others.
- 1 2 3 4 5

Unique purpose

36. What we are trying to accomplish with our collaborative project would be difficult for any single organization to accomplish by itself.
- 1 2 3 4 5
37. No other organization in the community is trying to do exactly what we are trying to do.
- 1 2 3 4 5

Sufficient funds, staff, materials, and time

38. Our collaborative group has adequate funds to do what it wants to accomplish.
- 1 2 3 4 5
39. Our collaborative group has adequate people power to do what it wants to accomplish.
- 1 2 3 4 5

Skilled leadership

40. The people in leadership positions for this collaboration have good skills for working with other people and organizations.
- 1 2 3 4 5

Other information

41. What is your relationship to C-SIP? (Please indicate all that apply)

..... Coalition Member (specify which one(s)):

..... Coalition Co-Chair (specify coalition)

..... Advisory Committee

..... Steering Committee

..... Attended Charting Our Future I

..... Attended Charting Our Future II

..... Other (specify):

42. Which of the following best describes you (please check one)?

..... Agency/organization administrative staff

..... Agency/organization front-line staff

..... Community member

..... Consumer/client

..... Other (please describe):

43. Please note the extent of your involvement in C-SIP activities. (Circle your response)

1	2	3	4	5	6	7
Not at all involved						Extensively involved

44. Please provide any other comments about C-SIP you may have below:

C-SIP 2003-2004 Proposed Budget

C-SIP 2003-04 PROPOSED BUDGET

	Totals
Staffing/Benefits	\$149,776
(Project Manager, Data Manager, Project Assistant, Data GRA, Director, Fiscal Manager)	
Operating Expenses	\$23,915
(Communications, postage, copying, coalition support, etc)	
Supplies	\$3,588
Travel	\$3,450
Total Costs	\$180,729
F + A Costs 10%	\$18,073
TOTAL ANNUAL BUDGET	\$198,802
Needs Assessment Accrual	\$27,500
TOTAL BUDGET REQUEST	\$226,302



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